

# AuthentiCare®

## Louisiana



**DEPARTMENT OF  
HEALTH**  
AND HOSPITALS

# Agenda

- **Welcome**
- **Introductions**
- **Overview of the Day**
- **What is AuthentiCare**
- **Glossary & Service Codes**
- **Using AuthentiCare**
- **Next Steps**

# AUTHENTICARE

## Pioneer in EVV/Home Care Solutions



First Data's AuthentiCare® solution was highlighted as a Promising Practice by the U.S. Centers for Medicare and Medicaid Services (CMS) based on South Carolina's Care Call implementation which provides automated in-home provider monitoring for over 12,000 providers and drove big increases in service quality and payment accuracy for the state

First Statewide solution focused on Electronic Visit Verification for home-based services and care was developed under a grant from CMS (Centers for Medicare and Medicaid Services) to South Carolina, in partnership with First Data, in 2002.

AuthentiCare has evolved from a custom implementation to a configurable, feature rich product offering:

- 4th Major Version of AuthentiCare has been published
- Product Roadmap is active and evaluates technical advancements in authentication/verification, along with CMS, State & Provider requirements

# AuthentiCare

## Benefitting States and Providers

- Over 4.5M billed claims
- Over \$153.6M in claim billings
- 7.2M IVR calls
- 2,050 providers and workers
- 13,600 consumers
- 8% growth per year in billed claims
- 13% growth per year in dollars
- 18% growth per year in self-directed dollars billed

It has saved the state money ... This is working out great for the providers.”  
“We do not have to do any billing; the program actually bills the state on our behalf, and we are paid within two weeks of providing services.”  
-Care Pro Home Health

“Participants are now getting more hours of care...the amount of service provided has increased and that is very important in the participants’ ability to stay in their own home and not seek institutional care.”  
-Roy Smith

# What is AuthentiCare?

Electronic Visit and Verification Solution (EVV) for automated scheduling, time/attendance tracking and claim submission that:

- Maintains a repository of authorized services
- Verifies a workers' location and length of service
- Identifies late or undelivered services
- Issues alerts to providers/case managers for missed visits
- Identifies visits that are overlapping: worker, service, client
- Provides flexible reporting in real-time



# AuthentiCare

**1** Service has been authorized



**2** Worker checks in



**3** Service is performed



**4** Worker checks out



**5** Claim is generated



**6** Provider is paid



# Why AuthentiCare?

- **User-friendly**
- **Less than 2 minutes for check-in and check-out claim creation**
- **Incorporates agency-specific and Medicaid business rules**
- **Assures that services reported were services delivered**
- **Provides transparency to Louisiana DHH, providers and clients**
- **Improves program integrity**
  - Reduced fraud and errors
  - Proactive monitoring tools
- **Enhances program administration**
  - Electronic system reduces paper and
  - Accelerates claims processing
  - **Reduces program cost**
- **Supports quality of care**
  - Alerts notify case managers/providers when critical services are missed or late
  - Maximizes responsiveness to clients

# Before AuthentiCare Louisiana DHH Implementation

Worker completes timesheet and gives to provider office staff to input data into the provider's "backend" system, or directly to a payer, for creation of a claim for payment. It's a manual process on paper until data is entered.

## SERVICES LOG

Provider Name: \_\_\_\_\_

Client Name: \_\_\_\_\_



Date: (MM/DD/YY)	Service	Start Time:	End Time:	Total Time:	Comments	Worker Initials:	Client Initials:
		AM / PM	AM / PM				
		AM / PM	AM / PM				
		AM / PM	AM / PM				
		AM / PM	AM / PM				
		AM / PM	AM / PM				
		AM / PM	AM / PM				
		AM / PM	AM / PM				
		AM / PM	AM / PM				
		AM / PM	AM / PM				
		AM / PM	AM / PM				
		AM / PM	AM / PM				
		AM / PM	AM / PM				
		AM / PM	AM / PM				



# After AuthentiCare Louisiana DHH Implementation

- Information from worker matched to information in AuthentiCare to create a claim for that service visit
- Worker used the IVR or mobile device at beginning and end of service delivery to contact AuthentiCare
- Provider office staff clicks one time to confirm a claim
- Claim then automatically submitted for payment

<b>* Client</b>	<b>* Provider</b>	<b>* Worker</b>	<b>Payer Assignment</b>		
Consumer, Test3 W 	CMC LA Test Provider 	Test, Worker2 	Current Payer For Client 		
<b>* Service</b>	<b>Date</b>	<b>Time</b>	<b>Amount</b>	<b>Date</b>	<b>Time</b>
LTPCS 2 	1/28/2015	01:00 PM	01:00 ###:##	1/28/2015	02:00 PM
<b>Activity Codes:</b> 11,10 (ex: 3,5,8)					
<b>Mileage:</b>					
<b>Travel Time:</b>					
Total Lines: 1 Total Claims: 1 Total Amount: \$9.24 Total Authorized: \$9.24					
 <b>Billed (01/29/2015)</b>					

Note: [Add Note](#)

Claim ID: **707**  
Filed On: **Web**

---

Printer Friendly  
Show All Claims

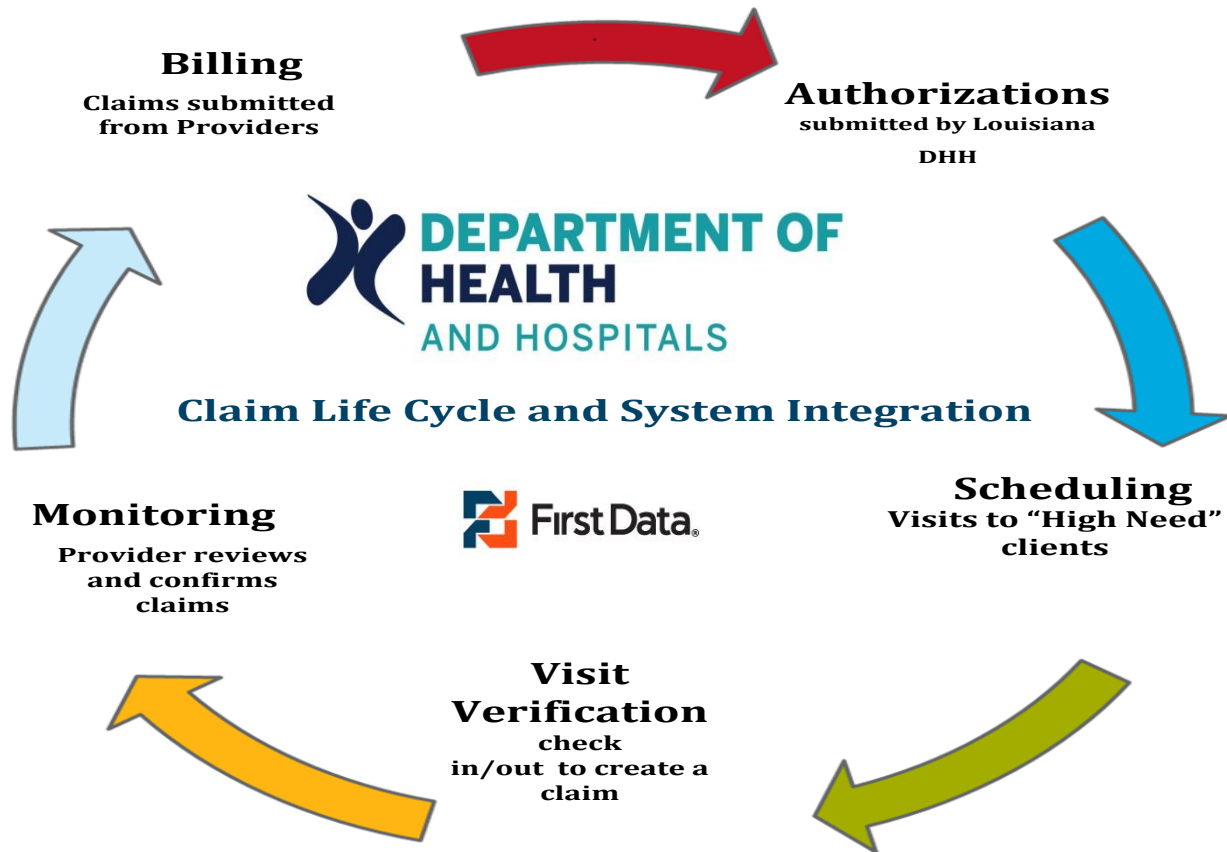
---

Total Claims: **1**  
Total Calculated Amount: **\$9.24**  
Total Authorized Amount: **\$9.24**  
Total Units: **4**  
Total Hours: **01:00**

☐ **Inactive Claim**

[Cancel](#)

# Claim Life Cycle



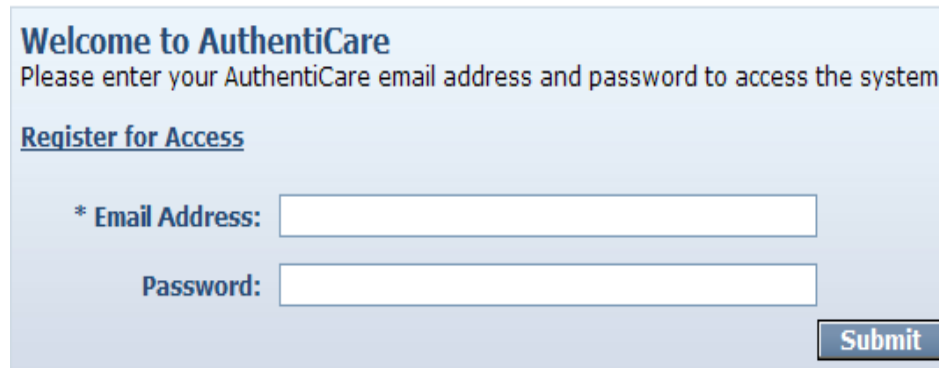
# Terms/Acronyms and Service Codes

To highlight a few:

- Client – a Louisiana DHH Medicaid participant
- Provider – provider agency
- Worker – Attendant, Personal Care Assistant, Direct Support Worker
- Event – a scheduled appointment
- Claim – each episode of service
- Service – procedure provided for the client

# Getting Started (Chapter 2)

- PRODUCTION Web site:  
<https://www.authenticare.com/ladhh>
- First Data will assign the first Administrator user login and password for each provider.
- The provider Administrator will assign other web users at his/her agency.

A screenshot of the Authenticare login interface. It features a light blue header with the text 'Welcome to Authenticare' and a sub-header 'Please enter your Authenticare email address and password to access the system.' Below this is a link 'Register for Access'. The main form area contains two input fields: '\* Email Address:' and 'Password:'. A 'Submit' button is located at the bottom right of the form.

Welcome to Authenticare

Please enter your Authenticare email address and password to access the system.

[Register for Access](#)

\* Email Address:

Password:

Submit

# Add Other Users

- Each provider staff member who will be using the web must be registered and assigned a sub-role by an Administrator user.

Registered Users				
<a href="#">Add User</a>				
User Name	Role	Registered On	Enabled	Delete
<a href="#">acr_test@provider.com</a>	LA_Administrator	01/26/2015	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<a href="#">jwc_test@provider.com</a>	LA_Administrator	01/27/2015	<input checked="" type="checkbox"/>	<input type="checkbox"/>

# Home Page (Chapter 3)

- Three Sections
  - Entities - provider, client & worker
  - Services and Authorizations
  - Claims
- Main Menu
- Links
- Everything is accessible from the Home Page

## Entities

Add New > [Worker](#)

Search >

**Go!**

## Services and Authorizations

Search Type: ☒ Service  
☐ Authorization

Service:

Authorization ID:

Service Type:  ▼

Authorization Start:  ▼

Authorization End:  ▼

Client:

Provider:

Worker:

Payer:

Service Period:

Procedure Code:

**Go! Clear**

## Claims

Add New > [Claim \(Standard\)](#)

Add New > [Claim \(Express\)](#)

☒ Claim

Search Type: ☐ Confirm Billing - View

☐ Confirm Billing - Bulk

Claim ID:

**Go! Clear**

Claim Status:  ▼

Claim Start:  ▼

Claim End:  ▼

Service:

Authorization ID:

Client:

Provider:

Worker:

Procedure Code:

User Option:  ▼

☐ Include Inactive Claims?

**Go! Clear**

# Demonstration

- Log-in
- Assign
- Un-assign (disable) a user
- Home Page (including searching – Chapter 4)
- Links
- Dashboards – Provider, Worker, Exceptions



# Summary

- First Data will assign the first Administrator web user for each provider location.
- First Data recommends that more than one person at each provider agency have the Administrator role.
- The Provider Administrator users control who has access to their data and functionality in AuthentiCare.
- Provider users can only see information specific to their provider location. Providers cannot see other providers' information.
- AuthentiCare is accessible via the Internet so it is important to disable users who temporarily or no longer need access to the system

# Managing Providers (Chapter 5)

- Louisiana Department of Health and Hospitals (DHH) sends data for each provider of AuthentiCare Louisiana DHH services.
- For scheduling, each provider should enter a Communication Email so that AuthentiCare can issue late and missed visits alerts.
- For the AuthentiCare and DHH distribution list, each provider should enter Email1 (and Email2 if applicable) for AuthentiCare update communications, policy changes, etc.
- Opt in/out to collect mileage and travel time
- *Please verify your provider information, and if it is incorrect, contact Louisiana DHH by sending questions and requests to:*  
evvhelp@la.gov
- **Demonstration: Provider Screen**

# 835 Remittance (Chapter 5)

- AuthentiCare submits claims for payment in a HIPAA-compliant 837P electronic file. Providers receive adjudication results in a HIPAA-compliant 835 remittance advice electronic file.
- The provider may upload the 835 into AuthentiCare using the 835 Import process.
- If the 835 is loaded, the provider will have a complete history of each claim; from the worker's check in/out or claim web entry, through adjudication with the amount paid linked to each service episode.
- **Demonstrate 835 Upload Process**

# Managing Workers (Chapter 6)

- Each worker must have a unique Worker ID to access the IVR or mobile app. The Worker ID is a 6-digit auto-generated identifier.
- First Data will pre-load your existing workers into AuthentiCare if you return the Excel spreadsheet
- After that pre-loading, it is a provider's responsibility to:
  - Edit worker information
  - Add new workers
  - Inactivate/end date workers
- **Demonstration: add, edit, inactivate workers**

# Clients (Chapter 7)

- Client information is loaded into AuthentiCare Louisiana DHH via an import from Louisiana DHH
- **You must verify the client's HOME address and HOME phone number. For updating this information, follow the current process**
- **You may add an alternative address and an alternative phone number on the AuthentiCare web**
- **Demonstration: viewing and editing clients**

# Authorizations

- All service information and authorizations are loaded via daily file transfer from Louisiana DHH
- The provider cannot add or edit authorizations.
- A claim cannot be confirmed and submitted for payment without a valid authorization.
- Service can be captured via IVR, mobile or web without a valid authorization. The claim will remain in the system until a valid authorization is sent by Louisiana DHH, or until the provider takes other action to resolve the situation.
- **Demonstration: searching and viewing authorizations**

# Summary

- Provider and Client data is sent to AuthentiCare by Louisiana DHH
- The provider must add:
  - Provider email address for late/missed visit alerts
  - Provider email address(es) for communication distribution list
  - Alternative address or phone number for clients
- Initial worker data will be loaded by First Data when providers return the Worker Template Excel spreadsheet.
- After implementation, the provider must maintain all worker information.
- Authorizations are loaded by data sent from Louisiana DHH.

# Scheduling (Chapter 9)

- Clients designated as “High Need” require a schedule.
- A visit can only be scheduled if there is an authorization for that service and client.
- Providers can schedule visits to clients one time and re-occurring.
- A warning message pops up if the visit conflicts with another.
- A scheduled visit is called an “event”.
- You can schedule one back up worker.
- You can search on events.
- You can edit an event up to the scheduled start time





# Late and Missed Visits (Chapter 9)

- An email alert is sent to the provider if a scheduled visit is late or missed
  - Late = worker does not check in within 15 minutes of scheduled start time
  - Missed = worker does not check in within 30 minutes of scheduled start time
- The provider must acknowledge (give a reason for) a missed visit.
- **Demonstration**

# Missed Visit Codes

Missed Visit Description	Code
Participant sick/Medical Appointment	1
Participant in hospital	2
Participant in psychiatric facility	3
Participant in respite center	4
Participant in nursing facility	5
Participant out of town	6
Participant/Representative refused services	7
Participant/Representative cancelled due to holiday	8
Participant/Representative requested different delivery time	9
Participant not available – justify in notes	10
Family voluntarily provided temporary service instead	11
Participant no longer eligible for services	12
Participant was transferred to another provider	13
Participant emergency	14
Participant expired	15
No staff available: DSW back up staffing designee contacted	16
No staff available: DSW back up staffing designee NOT contacted	17
No staff available: Family/natural support back up staffing designee contacted	18
No staff available: Family/natural support back up staffing designee NOT contacted	19
Natural disaster	20
Inclement weather	21
No landline or cell phone service	22
Late POC from Support Coordinator	23
Not a Missed Visit – justify in notes	24
Other – justify in notes	25

# Interactive Voice Response (IVR) (Chapter 10)

- Toll-free number available 24/7 = **1-800-337-1022 - PRODUCTION**
- Worker calls from the client's touch tone phone
- AuthentiCare matches the phone number called from to the client's phone number on record to verify that the worker is in the home
- IVR is in English and Spanish
- Worker enrolls a voice print during first call. Worker validates voice on subsequent calls
- Worker calls in before beginning service
- Worker calls out when service completed
- Calls are immediately reflected on the web
- **Demonstration**

# Mobile Device (Chapter 11)

- Mobile app is free to download
- Device is registered to provider or worker record
- Single solution for use in standard and limited-service zones
- Provides GPS location authentication
- Real time communication to AuthentiCare backend upon Check-in and Check-out
- Reflects AuthentiCare scheduling
- Ability to Store and Forward
- Alerts and Emergency Messaging



# Summary

- The scheduling function is to assist providers in managing workers' schedules to provide services to clients.
- Workers can use the IVR or a GPS-enabled mobile device for AuthentiCare Check-Ins/Check-Outs prior to and after providing services for a client in the home.
- If the worker cannot use the IVR or mobile device, information can be entered into AuthentiCare via the web by the provider's office staff.

# Claims (Chapter 12)

- Every service captured by the IVR, mobile device or entered via the web creates a claim that is assigned a unique claim ID
- Providers can search, view, and edit claims
  - Claims can only be edited up until the time they are submitted out of AuthentiCare
  - When editing claims, providers should include claim notes
  - Inactivate claims to effectively delete them
- Claims can be entered on the web
  - One at a time (standard)
  - Multiple lines at a time (express)
- **Demonstration: search and view, editing and adding claims**

# Claims (Chapter 12) #2

- The provider must confirm claims before they are submitted for payment:
  - Individually
  - In Bulk
- Behind the scenes editing occurs continuously based on Louisiana DHH business rules and billing requirements (including rounding)
- Editing identifies and assigns “exceptions” to a claim as appropriate

# Claim Exceptions (Chapter 12) #3

- Exceptions are classified as:
- **Critical exceptions** that prevent a claim being submitted for payment (example – no authorization)
- **Informational exceptions** that do not prevent submission but identify a specific scenario or conflict (example – called from a phone number not associated with the client)
- Complete Exception List – See Appendix A.3
- Some critical exceptions are automatically corrected when authorization files are received from Louisiana DHH staff.
- Many critical exceptions can be corrected by the provider
- **Demonstration: confirming claims**



# Summary

- Claims are created in AuthentiCare via IVR, mobile device or web entry.
- There is continuous behind-the-scenes editing of claims based on AuthentiCare Louisiana DHH business rules for services.
- The provider must confirm claims prior to submission for adjudication.
- Claims that do not meet requirements (have critical exceptions) may be corrected once additional information is entered by Louisiana DHH staff, or manual intervention by the provider is completed.
- Confirmed claims are submitted for adjudication automatically each weekday by 5 AM.

# Reporting (Chapter 13)

- 21 AuthentiCare reports are available 24/7 via the web
- Information is current as of the time the report is created by the user...in “real time”



# Reporting (Chapter 13) #2

- Wide variety of filtering and sorting options are provided
- User must choose to display the report in PDF, Excel, CSV, or XML format
- Without choice, reports default to PDF except the List reports that default to Excel

# AuthentiCare Reports

- Authorization Report with Claim Detail
- Authorization Report without Claim Detail
- Authorization Utilization Report
- Billing Invoice Report
- Calendar Report
- Claim Data Listing Report
- Claims Detail Report
- Claim History Report
- Eligible Client Data Listing Report
- Exception Report
- Late and Missed Visit Report

# AuthentiCare Reports #2

- Overlapped Claim by Client Report
- Overlapped Claim by Worker Report
- Provider Activity Report
- Remittance Advice Report
- Remittance Data Listing Report
- Time and Attendance Report
- Unauthorized Location Report
- Unauthorized Phone Number Report
- Worker Activity Report
- Workers by Provider Report

# Reporting Demonstration

- **Creating reports**
- **Sorting and filtering options**
- **Viewing reports**
- **Creating a template**
- **Samples of various reports**

# Assignment of Sub-Roles

- The provider Administrator user must assign sub-roles for staff to use AuthentiCare on the web.
- Each sub-role allows the user to view certain data and perform certain functions.
- A user's sub-role may be changed at any time.
- A user may have multiple sub-roles, but a unique login and password is required for each sub-role.

# Provider Sub-Roles (Appendix A.4) #2

Name	Rights
LA_Administrator	Rights to do all functions for that provider except those functions restricted to First Data (add, edit, delete services; add/edit/delete authorizations and delete providers). Can view the Provider and Worker Dashboards. [NOTE: First Data assigns a log in and initial password for the first Administrator for the provider who can then add/manage other users (including other administrators)]
LA_AdminAssistant	Rights to do all function Administrator can do except the ability to add/edit registrations.
LA_Payroll/Billing	Activities associated with billing and using AuthentiCare® information for employee payroll. Includes adding, editing, deleting claims as well as confirm billing. This role has primary responsibility for resolving claims with critical exceptions. Can view the Provider and Worker Dashboards.
LA_Human Resources	Activities associated with managing workers – adding, editing, and deleting workers and the Worker by Provider Report.
LA_Payroll/Billing/ HumanResources	Combination of Payroll/ Billing and Human Resources roles which may be more appropriate for smaller providers
LA_Scheduler/ Coordinator	Activities necessary to schedule visits for clients. Includes view and search of clients, workers, authorizations and services as these are needed to accomplish the tasks. This role will acknowledge missed visits and run Late and Missed Visit and Provider Activity Reports. This role can also view the Worker Dashboard.
LA_Claims Mgt 1	Can add, edit and delete claims
LA_Claims Mgt 2	Can add, edit, delete and confirm claims for submission for payment.
LA_Intake & Referral	Ability to edit client information



# User Support (Chapter 14)

- **User Manual Link:** on the training web site - under custom links
- **First Data Client Support** 1-800-441-4667, option 7, or email [AuthentiCare.Support@firstdata.com](mailto:AuthentiCare.Support@firstdata.com)
- **Louisiana Support** - [Evvhelp@la.gov](mailto:Evvhelp@la.gov)
- **Training Website:** <https://uat.authenticare.com/ladhh/login.aspx>
- **Training IVR:** (888) 462-7439, App Code 522

# Next Steps

- First Data will provide a login for an Administrator:
  - Training web site
  - Production web site
- User Administrator will assign users to sub-roles and begin using Training Website
- Begin training workers using Worker IDs assigned by First Data
- Participate in Training and Support Conference Calls

# Questions?



# Please complete the evaluation in your handouts

**Training Evaluation**

**JOB TITLE:** \_\_\_\_\_ **COMPANY/AGENCY:** \_\_\_\_\_

**DATE:** \_\_\_\_\_ **BRANCH OFFICE:** \_\_\_\_\_

*Please check the box that most closely applies. If the particular item does not apply to you, check the N/A box.*

1. How would you rate the <b>overall effectiveness</b> of the training class?	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Below Average <input type="checkbox"/>	Peer <input type="checkbox"/>	N/A <input type="checkbox"/>
2. How comprehensive was the <b>content</b> of the course material?	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Below Average <input type="checkbox"/>	Peer <input type="checkbox"/>	N/A <input type="checkbox"/>
3. How did you find the <b>organization</b> of the course material to assist you in performing your job functions?	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Below Average <input type="checkbox"/>	Peer <input type="checkbox"/>	N/A <input type="checkbox"/>
4. How did you find the <b>pace</b> at which the instructor taught the course? Was the length of time allotted to the topics adequate for your needs?	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Below Average <input type="checkbox"/>	Peer <input type="checkbox"/>	N/A <input type="checkbox"/>
5. How would you rate the <b>level</b> of the material presented?	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Below Average <input type="checkbox"/>	Peer <input type="checkbox"/>	N/A <input type="checkbox"/>
6. How would you rate the <b>overall effectiveness</b> of the training and documentation materials?	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Below Average <input type="checkbox"/>	Peer <input type="checkbox"/>	N/A <input type="checkbox"/>
7. How would you describe the documentation in terms of:						
a) Its <b>organization</b> around the job functions that you perform?	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Below Average <input type="checkbox"/>	Peer <input type="checkbox"/>	N/A <input type="checkbox"/>
b) Its clear and concise <b>appearance</b> ?	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Below Average <input type="checkbox"/>	Peer <input type="checkbox"/>	N/A <input type="checkbox"/>
c) Its <b>meaningfulness</b> and usefulness?	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Below Average <input type="checkbox"/>	Peer <input type="checkbox"/>	N/A <input type="checkbox"/>
d) Its <b>thoroughness</b> ?	Excellent <input type="checkbox"/>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Below Average <input type="checkbox"/>	Peer <input type="checkbox"/>	N/A <input type="checkbox"/>

*Are there any areas where you might require additional help? Include your email address so that someone can contact you.*

Thank you.

